### Case 16-30922 Doc 1 Filed 09/28/16 Entered 09/28/16 16:26:15 Desc Main Document Page 1 of 67

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture	Erica First name  L Middle name	First name  Middle name	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you hav	e		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7434		

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Case number (if known)

Debtor 1 Erica L Labine

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	16818 Meadowdale Drive	If Debtor 2 lives at a different address:			
		Oak Forest, IL 60452				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
<b>6.</b>	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Erica L Labine

⊃ar	t 2: Tell the Court About	Your B	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	Chapter 7					
		□с	hapter 11				
		□с	hapter 12				
		□с	hapter 13				
3.	How you will pay the fee		about how yo	ou may pay. Ty attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more defurself, you may pay with cash, cashier's check, or molf, your attorney may pay with a credit card or check	ney
					stallments. If you choose this option ts (Official Form 103A).	n, sign and attach the Application for Individuals to Pa	ay
			but is not req applies to yo	uired to, waive ur family size a	your fee, and may do so only if yound you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judge m ir income is less than 150% of the official poverty line installments). If you choose this option, you must fill al Form 103B) and file it with your petition.	that
			те Аррисан	on to Have the	onapier i i illing i ee walved (Ollic	ari omi 103B) and me it with your pention.	
).	Have you filed for bankruptcy within the	■ No					
	last 8 years?	□ Ye			140		
			District		When	Case number	
			District		When When	Case number  Case number	
			District		when	Case number	
10.	Are any bankruptcy	■ No	<b>D</b>				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	<del>9</del> \$.				
			Debtor	-		Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No	Go to I	ine 12.			
		□ Ye	es. Has yo	our landlord obt	ained an eviction judgment against	you and do you want to stay in your residence?	
				No. Go to line	12.		
				Yes. Fill out Ir bankruptcy pe		ludgment Against You (Form 101A) and file it with this	5

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Desc Main Document Page 4 of 67 Case number (if known) Debtor 1 Erica L Labine Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D).

#### Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

Part 4:

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

☐ Yes.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Debtor 1 Erica L Labine Document Page 5 of 67

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Det	otor 1 Erica L Labine			Case num	ber (if known)			
Par	t 6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
			6b. Are your debts primarily business debts? Business debts are debts that you incurred to money for a business or investment or through the operation of the business or investment					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or busin	ess debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be a	Do you estimate that after any exempt provailable to distribute to unsecured creditor	operty is excluded and administrative expenses rs?			
	administrative expenses		■ No					
	are paid that funds will be available for		☐ Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	□ 1-49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	<b>■</b> 50-99		☐ 5001-10,000	☐ 50,001-100,000			
	owe?	□ 100-19	9	□ 10,001-25,000	☐ More than100,000			
		□ 200-99	9					
19.	How much do you	<b>\$0 - \$5</b>	0.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
	50 11011111		01 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		□ \$500,0	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$5	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		1 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			01 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
		□ \$500,0	01 - \$1 million	<b>—</b> \$100,000,001 - \$300 million	Li More than \$50 billion			
Par	t7: Sign Below							
For	you	I have exa	mined this petition, and I de	clare under penalty of perjury that the info	ormation provided is true and correct.			
				7, I am aware that I may proceed, if eligib relief available under each chapter, and I	le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
		Erica L L	L Labine .abine	Signature of Deb	otor 2			
		Signature	of Debtor 1	-				
		Executed		6 Executed on				
			MM / DD / YYYY	N	MM / DD / YYYY			

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Debtor 1 Erica L Labine Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David H. Cutler	Date	September 27, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
David H. Cutler		
Printed name		
Cutler & Associates, Ltd.		
Firm name		
4131 Main St		
Skokie, IL 60076		
Number, Street, City, State & ZIP Code		
Contact phone <b>847-673-8600</b>	Email address	stuartIswanson@gmail.com
Bar number & State		

		1700.11111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Erica L Labine			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,925.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	14,925.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	18,177.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	99,056.71
	Your total liabilities	\$	117,233.71
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	12,013.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,150.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bounded purpose." 14 LLS C. \$ 104(9). Fill purblings 8.0g for stellistical purposes. 28 LLS C. \$ 150	a personal	l, family, or

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

3,207.33

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Bort A on Schoolule E/E compaths following:	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	30,719.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	30,719.00

		Document Page	10 of 67		
Fill in this i	nformation to identify your	case and this filing:			
Debtor 1	Erica L Labine				
D - l- ( 0	First Name	Middle Name Last Nam	е		
Debtor 2 (Spouse, if filing)	) First Name	Middle Name Last Nam	ve		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS			
Offica Otato	3 Bankruptey Court for the.	TOTAL PICTURE OF ILLINOIS			
Case numbe	er				Check if this is an amended filing
					arrieriaca ming
Official	Form 106 \( \text{/D} \)				
	Form 106A/B	.av4.,			
	lule A/B: Prop				12/15
hink it fits be nformation. If Answer every	st. Be as complete and accura f more space is needed, attach question.	e items. List an asset only once. If an asset f te as possible. If two married people are filing a separate sheet to this form. On the top of a	g together, both are equally resp ny additional pages, write your n	onsible for supply	ying correct
Part 1: Desc	cribe Each Residence, Building	, Land, or Other Real Estate You Own or Hav	an Interest In		
. Do you ow	n or have any legal or equitable	e interest in any residence, building, land, or	similar property?		
■ No. Go t	o Part 2.				
☐ Yes. Wh	nere is the property?				
-					
Part 2: Desc	cribe Your Vehicles				
□ No ■ Yes					
3.1 Make:	Chevy	Who has an interest in the propert	('heck one		s or exemptions. Put aims on Schedule D:
Model	Trax LS 2WD	Debtor 1 only			Secured by Property.
Year:	2015	Debtor 2 only	Current va	alue of the C	urrent value of the
• • • • • • • • • • • • • • • • • • • •	- <u> </u>	Debtor 1 and Debtor 2 only	entire pro	perty? p	ortion you own?
	information: ed via NADA trade in	☐ At least one of the debtors and ar	other		
8/18/		Check if this is community prop (see instructions)	perty \$1	10,950.00	\$10,950.00
3.2 Make:		Who has an interest in the propert			s or exemptions. Put aims on <i>Schedule D:</i>
Model		Debtor 1 only	Creditors V	Vho Have Claims	Secured by Property.
Year:	2015	Debtor 2 only			urrent value of the
	ximate mileage:information:	Debtor 1 and Debtor 2 only	entire pro	perty? p	ortion you own?
	e Vehicle lender on	At least one of the debtors and ar	other		
Sche	edule G. DEBTOR IS RENDERING.	Check if this is community prop (see instructions)	perty	\$0.00	\$0.00
		TVs and other recreational vehicles, oth onal watercraft, fishing vessels, snowmobil		;	

☐ Yes

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Case number (if known) Document Debtor 1 Erica L Labine 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$10,950.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Various used household furniture and personal possessions at \$250.00 liquidated values including: 1 bed room set. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No ■ Yes. Describe..... 1 used TV, 1 used laptop, 1 used VCR at liquidated values. \$350.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$100.00 Various used clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list

☐ Yes. Give specific information.....

■ No

Official Form 106A/B

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Case number (if known) Document Debtor 1 Erica L Labine 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$700.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ Yes..... Cash \$25.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... Savings Bank of America--account negative \$0.00 xxxxxxxx5784 17.1. Checking **Bank of America** \$250.00 xxxxxxxx6564 17.2. Checking **Bank of America** \$0.00 17.3. xxxxxxxx1622 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them

Van Liet aank annount annount

□ No

21. Retirement or pension accounts

an anatal.

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

Yes. List each account separately.

Type of account: Institution name:

Issuer name:

401k Starbucks \$0.00

page 3

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Case number (if known) Document Debtor 1 Erica L Labine 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No

Yes. Name the insurance company of each policy and list its value. Company name:

Surrender or refund Beneficiary: value:

Mutual of Omaha--Cash Value Mother \$2,000.00

Prudential--Cash value \$1,000.00 Mother

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Case number (if known)

Document Erica L Labine Debtor 1

	Hartford Term Life	Mother	\$0.00
If you are the someone has			eive property because
☐ Yes. Give	specific information		
	nst third parties, whether or not you have filed a la ccidents, employment disputes, insurance claims, or n		
☐ Yes. Desci	ribe each claim		
■ No	gent and unliquidated claims of every nature, incl	uding counterclaims of the debtor and rights to	o set off claims
OF Amusimamaia			
■ No	I assets you did not already list		
	specific information		
	llar value of all of your entries from Part 4, includi		\$3,275.00
Part 5: Describe	Any Business-Related Property You Own or Have an Inte	rest In. List any real estate in Part 1.	
37. Do you own or	have any legal or equitable interest in any business-rela	ed property?	
No. Go to Par	t 6.		
☐ Yes. Go to lin	e 38.		
	Any Farm- and Commercial Fishing-Related Property You or have an interest in farmland, list it in Part 1.	ı Own or Have an Interest In.	
46. Do you own	or have any legal or equitable interest in any farm	or commercial fishing-related property?	
No. Go to F	Part 7.		
☐ Yes. Go to	line 47.		
Part 7: Desc	cribe All Property You Own or Have an Interest in That Yo	u Did Not List Above	
	other property of any kind you did not already list eason tickets, country club membership	?	
■ No	cason nokets, country dub membership		
	pecific information		
54 Add the do	llar value of all of your entries from Part 7. Write th	at number here	\$0.00
OT. Add the UU	na. Tanas or an or your chilles nom r art r. Wille ti		ψυ.υυ

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Erica L Labine

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$10,950.00		
57.	Part 3: Total personal and household items, line 15	\$700.00		
58.	Part 4: Total financial assets, line 36	\$3,275.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$14,925.00	Copy personal property total	\$14,925.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$14,925.00

Official Form 106A/B Schedule A/B: Property page 6

	Official Form 106C Schedule C: The Property You Claim as Exempt 4/16					
Official F	orm 106C					
Case number (if known)					☐ Check if this is an amended filing	
United States I	Bankruptcy Court for the	e: NORTHERN DISTRIC	OF ILLINOIS			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
Debtor 1	Erica L Labine First Name	Middle Name	Last Name			
Fill in this info	ormation to identify yo	our case:				
	ase 10-30922			10 10.20.15	Desc Main	

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	■ You are claiming state and federal nonba	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	735 ILCS 5/12-1001(a) 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b)			
	Various used clothes Line from Schedule A/B: 11.1	\$100.00		\$100.00	735 ILCS 5/12-1001(a)			
	Line Holli Schedule A/D. 1111			100% of fair market value, up to any applicable statutory limit				
	Checking xxxxxxxxx6564: Bank of America	\$250.00		\$250.00	735 ILCS 5/12-1001(b)			
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit				
	Mutual of OmahaCash Value Beneficiary: Mother	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)			
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit				
	PrudentialCash value Beneficiary: Mother	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)			
	Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit				

3. Are you claiming a homestead exemption of more than \$160,375?

Part 1: Identify the Property You Claim as Exempt

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Official Form 106C

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No 

Yes Case 16-30922 Doc 1 Filed 09/28/16 Entered 09/28/16 16:26:15 Desc Main Page 17 of 67 Case number (if known) Document

Debtor 1 Erica L Labine

Date debt was incurred						
	Opened 07/15 Last Active 7/13/16	Last 4 digits of accour	nt number 5310			
Check if this claim re community debt	elates to a	☐ Other (including a right to o	ffset)			
At least one of the del		☐ Judgment lien from a lawsu				
Debtor 1 and Debtor 2		Statutory lien (such as tax li				
Debtor 2 only		car loan)				
Debtor 1 only		An agreement you made (s	uch as mortgage or secu	red		
Who owes the debt?	Check one.	☐ Disputed  Nature of lien. Check all that	apply.			
Number, Street, City, S	State & Zip Code	☐ Unliquidated				
Winterville, N	C 28590	Contingent				
Po Box 1697		miles Valued via NADA trade As of the date you file, the cla	e in 8/18/16			
Creditor's Name		2015 Chevy Trax LS 2V		ψ10,177.00	Ψ10,930.00	Ψ1,221.00
for each claim. If more th	an one creditor has	more than one secured claim, list is a particular claim, list the other of cal order according to the credito Describe the property that se	creditors in Part 2. As r's name.	Amount of claim Do not deduct the value of collateral. \$18,177.00	Value of collateral that supports this claim \$10,950.00	Unsecured portion If any \$7,227.00
	ured Claims			Column A	Column B	Column C
Yes. Fill in all o		below.				
_		his form to the court with you	r otner schedules. You	u nave nothing else t	o report on this form.	
. Do any creditors have				. In accompany to the second of	a manufacture (Interfere	
s needed, copy the Addi number (if known).	tional Page, fill it	If two married people are filing out, number the entries, and at				
		Who Have Clai	ms Secured	by Propert	у	12/15
Official Form 10	)6D					
(if known)						t if this is an ded filing
Case number						
United States Bankrup	tcy Court for the	NORTHERN DISTRICT	OF ILLINOIS			
Debtor 2 (Spouse if, filing) Fir	st Name	Middle Name	Last Name			
	rica L Labine st Name	Middle Name	Last Name			
		ii case.				
Fill in this informatio	n to identify you	Docume:	nt Page 18	OI b/		
		D = =:::::	D 10	~f C7		

Add the dollar value of your entries in Column A on this page. Write that number here: \$18,177.00 If this is the last page of your form, add the dollar value totals from all pages. \$18,177.00 Write that number here:

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0000 10 00022   1	Docum	ent Page 1	9 of 67	10 00001	viairi
Fill in this in	formation to identify your					
Debtor 1	Erica L Labine					
	First Name	Middle Name	Last Name			
Debtor 2	First Name	Middle Nove	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS			
Case numbe	r					
(if known)					☐ Chec	k if this is an
					amen	nded filing
Official F	orm 106E/F					
	e E/F: Creditors W	ho Have Unsec	cured Claims			12/15
	e and accurate as possible. Us			Part 2 for creditors with NON	PRIORITY claims	
Schedule G: Ex Schedule D: Ci left. Attach the	contracts or unexpired leases xecutory Contracts and Unexp reditors Who Have Claims Sec Continuation Page to this page a number (if known).	ired Leases (Official Form ured by Property. If more	n 106G). Do not include space is needed, copy	any creditors with partially se the Part you need, fill it out, n	ecured claims that number the entries	are listed in in the boxes on the
Part 1: Li	st All of Your PRIORITY Un	secured Claims				
1. Do any cr	editors have priority unsecure	d claims against you?				
No. Go	to Part 2.					
☐ Yes.						
Part 2: Li	st All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cr	editors have nonpriority unsec	ured claims against you?	?			
☐ No. Yo	u have nothing to report in this p	art. Submit this form to the	court with your other sch	edules.		
Yes.						
unsecured	your nonpriority unsecured cladim, list the creditor separately treditor holds a particular claim, li	for each claim. For each c	laim listed, identify what	type of claim it is. Do not list cla	ims already include	d in Part 1. If more
					То	tal claim
4.1 Affil	iated Radiologists SC	Last 4 dig	its of account number	9766		\$50.10
	riority Creditor's Name	<b>NA</b> (1				
	t 4104 ol Stream, IL 60122-4104		s the debt incurred?			
	per Street City State Zlp Code		date you file, the claim	is: Check all that apply		
Who	incurred the debt? Check one.					
■ De	ebtor 1 only	☐ Conting	gent			
□ De	ebtor 2 only	☐ Unliqui	dated			
□ De	ebtor 1 and Debtor 2 only	☐ Dispute	ed			
☐ At	least one of the debtors and and	other Type of N	ONPRIORITY unsecure	d claim:		
□сі	heck if this claim is for a comr	munity	it loans			
debt	alaim auhiaatta -#+0			aration agreement or divorce tha	at you did not	
_	e claim subject to offset?		oriority claims	ng plans, and other similar debts	c	
■ No		_				
☐ Ye	es	Other.	Specify			

Document Page 20 of 67 Case number (if know) Debtor 1 Erica L Labine Amita Health Adventist Medical 3040 \$100.00 4.2 Last 4 digits of account number Cntr Nonpriority Creditor's Name When was the debt incurred? PO Box 24013 Chattanooga, TN 37422 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify 4.3 **Assurex Health** Last 4 digits of account number 5786 \$330.00 Nonpriority Creditor's Name When was the debt incurred? **Dept CH 19838** Palatine, IL 60055-9838 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 Avant Last 4 digits of account number \$6,400.00 Nonpriority Creditor's Name When was the debt incurred? 222 N. LaSalle St., Suite 1700 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Page 21 of 67 Case number (if know) Document Debtor 1 Erica L Labine 4.5 \$0.00 Avant Inc Last 4 digits of account number 3554 Nonpriority Creditor's Name Opened 07/15 Last Active 640 N Lasalle St When was the debt incurred? 10/26/15 Chicago, IL 60654 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify 4.6 **Barclays Bank Delaware** 4881 Last 4 digits of account number \$7,842.00 Nonpriority Creditor's Name Opened 11/13 Last Active Po Box 8803 When was the debt incurred? 5/31/16 Wilmington, DE 19899 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.7 **Bk Of Amer** Last 4 digits of account number 6240 \$7,464.00 Nonpriority Creditor's Name Opened 08/15 Last Active Po Box 982238 When was the debt incurred? 12/03/15 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

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4.8	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9754	\$0.00		
	Po Box 30253 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/10/08 Last Active 8/30/11			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.9	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	2759	\$0.00		
	Po Box 30253 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/10/08 Last Active 11/18/10			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	1			
4.1 0	Capital One Bank Usa N	Last 4 digits of account number	6460	\$4,025.00		
	Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 06/06 Last Active 2/08/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	st one of the debtors and another  Type of NONPRIORITY unsecured claim:				
	$\square$ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card	1			

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Case number (if know) Debtor 1 Erica L Labine 4.1 Chase Bank USA, NA 2309 \$2,421.15 Last 4 digits of account number Nonpriority Creditor's Name PO Box 4045 When was the debt incurred? Concord, CA 94524-4045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Chase Card** 2309 \$2,421.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/11 Last Active Po Box 15298 When was the debt incurred? 11/08/15 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 **Chase Card** 6934 \$2.045.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 06/15 Last Active Po Box 15298 When was the debt incurred? 12/04/15 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Card

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4.1 4	Chase Card	Last 4 digits of account number	1092	\$0.00
	Nonpriority Creditor's Name  Po Box 15298	When was the debt incurred?	Opened 09/07 Last Active 10/08/08	
	Wilmington, DE 19850	_		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1 5	Chevrolet	Last 4 digits of account number	9146	\$2,199.39
	Nonpriority Creditor's Name PO Box 100	When was the debt incurred?		
	Williamsville, NY 14231	_		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify		
4.1 6	Citi Nonpriority Creditor's Name	Last 4 digits of account number	6019	\$3,921.00
	Pob 6241 Sioux Falls, SD 57117	When was the debt incurred?	Opened 08/15 Last Active 11/20/15	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		
		. ,		

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Case number (if know) Debtor 1 Erica L Labine 4.1 **Comenity Bank** 1557 \$323.89 Last 4 digits of account number Nonpriority Creditor's Name C/O Lane Bryant When was the debt incurred? PO Box 182273 Columbus, OH 43218-2273 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Comenity Bank/cathrins** 6671 \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 11/09 Last Active 4590 E Broad St When was the debt incurred? 8/09/11 Columbus, OH 43213 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Comenity Bank/Inbryant \$323.00 1557 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/12 Last Active 4590 E Broad St When was the debt incurred? 6/11/16 Columbus, OH 43213 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account

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■ No ☐ Yes

debt

☐ Obligations arising out of a separation agreement or divorce that you did not

**Rush University Medical Center** 

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

Other. Specify

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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■ No

☐ Yes

☐ Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Educational

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Page 28 of 67 Case number (if know) Document Debtor 1 Erica L Labine 4.2 \$4,586.00 Dept Of Education/neln 5339 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 09/13 Last Active 121 S 13th St When was the debt incurred? 7/31/16 Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.2 Dept Of Education/neln 5734 \$4,500.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/15 Last Active 121 S 13th St When was the debt incurred? 7/31/16 Lincoln, NE 68508 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.2 Dept Of Education/neln 4936 \$3,028.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 10/12 Last Active 121 S 13th St When was the debt incurred? 7/31/16 Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community

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■ No

☐ Yes

report as priority claims

☐ Other. Specify

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Educational

Is the claim subject to offset?

Page 29 of 67 Case number (if know) Document Debtor 1 Erica L Labine 4.2 Fifth Third Bank 4839 \$0.00 Last 4 digits of account number q Nonpriority Creditor's Name Opened 04/08 Last Active 5050 Kingsley Dr When was the debt incurred? 1/31/14 Cincinnati, OH 45227 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Automobile ☐ Yes 4.3 **GI Associates** 1845 \$92.69 Last 4 digits of account number 0 Nonpriority Creditor's Name 10500 S Cicero When was the debt incurred? Oak Lawn, IL 60453-5205 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 \$15,493,00 **Gm Financial** 9146 Last 4 digits of account number Nonpriority Creditor's Name Opened 8/24/15 Last Active Po Box 1181145 When was the debt incurred? 5/24/16 Arlington, TX 76096 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Auto Lease--DEBTOR IS SURRENDERING VEHICLE AND NOT MAKING PAYMENTS

Other. Specify AS INIDICATED ON SCHEDULE G

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Case number (if know) Debtor 1 Erica L Labine 4.3 **Green Circle** \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name One Wakpamni Lake Housing When was the debt incurred? Batesland, SD 57716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Kohls/capone 3030 \$527.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/11 Last Active N56 W 17000 Ridgewood Dr When was the debt incurred? 4/13/16 Menomonee Falls, WI 53051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.3 **Loan Depot** 4578 \$1,409.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 503430 When was the debt incurred? San Diego, CA 92150-3430 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Document Page 31 of 67 Case number (if know) Debtor 1 Erica L Labine 4.3 Loyola Medicine 0381 \$132.86 Last 4 digits of account number 5 Nonpriority Creditor's Name Two Westbrook Corporate Center, When was the debt incurred? Suite 70 Westchester, IL 60154 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Medical Business Bureau, LLC 8190 \$476.23 Last 4 digits of account number 6 Nonpriority Creditor's Name **PO Box 326** When was the debt incurred? Grand Haven, MI 49417-0326 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Rush University Medical Center ☐ Yes 4.3 Medical Business Bureau, LLC 9357 \$40.00 Last 4 digits of account number Nonpriority Creditor's Name **PO Box 326** When was the debt incurred? Grand Haven, MI 49417-0326 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Rush University Medical Center ☐ Yes

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Medical Business Bureau, LLC

Last 4 digits of account number 9335

Medical Business Bureau, LLC	Last 4 digits of account number 9335	\$100.0		
Nonpriority Creditor's Name PO Box 326 Grand Haven, MI 49417-0326	When was the debt incurred?			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you di report as priority claims	d not		
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify Rush University Medical Center			
Nationwide Credit & Collection, Inc	Last 4 digits of account number 4216	\$52.4		
Nonpriority Creditor's Name 815 Commerce Dr, Suite 270 Oak Brook, IL 60523-8852	When was the debt incurred?			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you direport as priority claims	d not		
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify Palos Community Hospital			
Nordstrom/td	Last 4 digits of account number 8248	\$732.0		
Nonpriority Creditor's Name  13531 E Caley Ave Englewood, CO 80111	Opened 12/15 Last Active 7/24/16			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you direport as priority claims	d not		
No	Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	Other. Specify Credit Card			

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Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Erica L Labine Case number (if know) 4.4 **Progressive Leasing** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 413110 When was the debt incurred? Salt Lake City, UT 84141 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 **Prosper Funding LLC** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 221 Main Street, SUite 300 San Francisco, CA 94105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 Prosper Marketplace In 4420 Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 08/15 Last Active 101 2nd St FI 15 When was the debt incurred? 12/07/15 San Francisco, CA 94105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Unsecured

☐ Debts to pension or profit-sharing plans, and other similar debts

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☐ Yes

Other. Specify

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Debtor	1 Erica L Labine	——————————————————————————————————————	Case number (if know)	
4.5 0	Secretary of State, License Renewal	Last 4 digits of account number	4744	\$101.00
	Nonpriority Creditor's Name 3701 Winchester Rd Springfield, IL 62707-9700	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
4.5	Silver Cross Hospital	Last 4 digits of account number	2751	\$100.00
	Nonpriority Creditor's Name Mail Processing Center PO Box 739	When was the debt incurred?		
	Moline, IL 61266-0739			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	a ciaim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify		
4.5	Syncb/amazon		2850	\$1,242.00
2	Nonpriority Creditor's Name	Last 4 digits of account number		\$1,242.00
	Po Box 965015 Orlando, FL 32896	When was the debt incurred?	Opened 04/15 Last Active 5/28/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	

☐ Yes

■ Other. Specify Charge Account

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Page 37 of 67 Case number (if know) Debtor 1 Erica L Labine 4.5 Syncb/amer Eagle Dc 0925 \$2,672.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 07/15 Last Active Po Box 965005 When was the debt incurred? 11/07/15 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.5 Syncb/pep Boys 4450 \$1,456.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/15 Last Active C/o Po Box 965036 When was the debt incurred? 5/18/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.5 Synchrony Bank 4450 \$1,419.33 Last 4 digits of account number Nonpriority Creditor's Name C/O Pep Boys When was the debt incurred? PO Box 960061 Orlando, FL 32896-0061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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University Anesthesiologists SC	Last 4 digits of account number 7047	\$
Nonpriority Creditor's Name PO Box 128	When was the debt incurred?	
Glenview, IL 60025-0128	when was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
University Pain Physicians LLC	Last 4 digits of account number 1442	\$2
Nonpriority Creditor's Name		<u> </u>
PO Box 1151	When was the debt incurred?	
Glenview, IL 60025-8103  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date year me, the stain is. Shock an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
University Pathologists, P.C	Last 4 digits of account number 1884	
Nonpriority Creditor's Name	- Last 4 digits of account number	
5700 Southwyck Blvd	When was the debt incurred?	
Toledo, OH 43614-1509  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Number Street City State ZIP Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Offeck all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Erica L Labine

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total 0	Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	œ.	0.00
HOIH Part I		, c		\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total 0	
	6f.	Student loans	6f.	\$	30,719.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	68,337.71
		here.		Ψ	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	99,056.71

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		120021111	$\frac{1}{1}$	
Fill in this infor	mation to identify your	case:		
Debtor 1	Erica L Labine			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Gm Financial Po Box 1181145 Arlington, TX 76096	Acct# 0171099146 Opened Opened 8/24/15 Last Active 5/24/16 Auto Lease 2015 Chevy Silverado

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		Docume	ent Page 41 d	OT h /	
Fill in this i	information to identify your				
Debtor 1	Erica L Labine				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	. ,				
Case number (if known)	er				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	obtore			42/45
Scriedi	ule n. Toul Cou	enroi 2			12/15
our name a	and case number (if known) ou have any codebtors? (If	. Answer every question		, 0	p of any Additional Pages, write
■ Na					
■ No □ Yes					
Arizona  No. (	in the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ty states and territories include )
in line 2 Form 1 out Col	2 again as a codebtor only i	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed to DGG). Use Schedule D,	ng with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
INC	ame, Number, Street, City, State and 2	r Code		Check all schedul	es tnat apply:
3.1				D Schedule D, lir	ne
N	lame			☐ Schedule E/F,	
				☐ Schedule G, lir —	ne
	lumber Street City	State	ZIP Code		
				Пол	
3.2 N	lame			Schedule D, lir □ Schedule E/F,	·
				☐ Schedule E/F,	
N	lumber Street			—	
	Sity	State	ZIP Code		

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Fill	in this information to identify you	ır case:							
Deb	otor 1 Erica L La	abine			_				
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number 		-						napter
O	fficial Form 106I				<u>N</u>	/M / DD/ Y	YYY		
S	chedule I: Your In	come							12/15
sup <sub> </sub> spo atta	is complete and accurate as polying correct information. If youse. If you are separated and you a separate sheet to this for the Describe Employme	ou are married and not fili your spouse is not filing w m. On the top of any additi	ng jointly, and your sith you, do not inclu	spouse i: de inforn	s living with nation abou	you, incl t your spo	ude informatior ouse. If more sp	n about yo ace is ne	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing s	pouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Emplo			
		nation about additional		☐ Not employed			mployed		
	employers.	Occupation	Medical Assista	ınt					
	Include part-time, seasonal, or self-employed work.	Employer's name	Loyola Universi Center	ty Medi	cal				
	Occupation may include stude or homemaker, if it applies.	Employer's address	PO Box 3021 Milwaukee, WI 5	53201					
		How long employed t	here? 6 yrs			_			
Par	t 2: Give Details About M	Monthly Income							
spou If yo	mate monthly income as of the use unless you are separated.  u or your non-filing spouse have	more than one employer, co	,		•				Ü
more	e space, attach a separate shee	t to this form.			F D	b ( = = 4	F D -   1 0		
					For De	btor 1	For Debtor 2 non-filing sp		
2.	List monthly gross wages, s deductions). If not paid month			2.	\$18	3,100.00	\$	N/A	
3.	Estimate and list monthly ov	ertime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add	d line 2 + line 3.		4.	\$18,1	00.00	\$	N/A	

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Deb	tor 1	Erica L Labine	-	Ca	ise number (if known)					
					For Debtor 1	non-f	ebtor 2	ouse		
	Cop	y line 4 here	4.	\$	18,100.00	\$		N/A	<u>\</u>	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	3,629.00	\$		N/A		
	5b.	Mandatory contributions for retirement plans	5b.			\$		N/A	_	
	5c.	Voluntary contributions for retirement plans	5c.	\$		\$		N/A		
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	<u> </u>	
	5e.	Insurance	5e.			\$		N/A	1	
	5f.	Domestic support obligations	5f.	\$		\$		N/A	_	
	5g.	Union dues	5g.			\$		N/A		
	5h.	Other deductions. Specify:	_ 5h.			+ \$		N/A	_	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	6,326.00	\$		N/A	<u>\</u>	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	11,774.00	\$		N/A	<u>\</u>	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		N/A		
	8b.	Interest and dividends	8b.	\$		\$		N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A	<u>\</u>	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		N/A	1	
	8e.	Social Security	8e.	\$	0.00	\$		N/A	<u>\</u>	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$		\$		N/A		
	8g.	Pension or retirement income	8g.			\$		N/A	_	
	8h.	Other monthly income. Specify: Part Time	8h.	+ \$	239.00	+ \$		N/A	<u>\</u>	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	239.00	\$		N/	Ά	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	1	12,013.00 + \$		N/A	= \$	12,013	00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ <u> </u>	12,013.00 + ψ_		IN/A	- Ψ -	12,013	.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.  In the contribution of the expenses that you list in Schedule and the contribution of the expenses that you list in Schedule and the contribution of the expenses that you list in Schedule and the contribution of the expenses that you list in Schedule and the contribution of the expenses that you list in Schedule and the contributions to the expenses that you list in Schedule and the contributions from an unmarried partner, members of your household, your principle and the contributions from an unmarried partner, members of your household, your principle and the contributions from an unmarried partner, members of your household, your principle and the contributions from an unmarried partner, members of your household, your principle and the contributions from an unmarried partner, members of your household, your principle and the contribution of the cont	depe		. •	•	hedule 11.	_	0	.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12.	\$	12,013	.00
13.	Do	you expect an increase or decrease within the year after you file this form	?					Comb month	ined Ily incon	ne
		No.								
		Voc Evoloin:								

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Fill	in this information to identify your case:				
Deb	otor 1 Erica L Labine		Che	eck if this is:	
Dob	otor 2			An amended filing	uing postpotition aboutor
	ouse, if filing)			13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT O	F ILLINOIS		MM / DD / YYYY	
Cas	se number				
(If kı	known)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married pe ormation. If more space is needed, attach another sheet mber (if known). Answer every question.				
Pari	tt 1: Describe Your Household Is this a joint case?				
••	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Ex	rpenses for Separate Hous	ehold of De	btor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and  Yes. Fill out this informati each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					□ No □ Yes
				<del>_</del>	□ No
					Yes
					□ No
3.	Do your expenses include				☐ Yes
0.	expenses of people other than yourself and your dependents?				
	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date u	nless you are using this	form as a s	upplement in a Cha	apter 13 case to report
	penses as of a date after the bankruptcy is filed. If this is plicable date.	a supplemental Schedul	le J, check t	the box at the top o	f the form and fill in the
	clude expenses paid for with non-cash government assis				
	ficial Form 106l.)	ruie I. Tour moome		Your exp	enses
4.	The rental or home ownership expenses for your resid payments and any rent for the ground or lot.	lence. Include first mortgaç	ge 4.	\$	500.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	0.00
5.	<ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, suc</li> </ul>	h as home equity loans	4d. 5.	·	0.00 0.00

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Deb	otor 1	Erica L L	abine	Case no	uml	ber (if known)	
6.	Utiliti	ies:					
٥.	6a.		heat, natural gas	6	a.	\$	0.00
	6b.		wer, garbage collection		b.		0.00
	6c.		e, cell phone, Internet, satellite, and cable servi		c.		75.00
	6d.		ecify: Cable Bundle		d.		80.00
7.			ekeeping supplies		7.	·	350.00
8.			children's education costs		8.	\$	0.00
9.			ry, and dry cleaning		9.	\$	80.00
		•	products and services		0.	· -	30.00
		-	ntal expenses		1.		250.00
			Include gas, maintenance, bus or train fare.	•	•		
			ar payments.	1	2.	\$	400.00
13.	Enter	rtainment,	clubs, recreation, newspapers, magazines,	and books 1	3.	\$	0.00
14.	Char	itable cont	ributions and religious donations	1	4.	\$	0.00
15.	Insur						
			surance deducted from your pay or included in	lines 4 or 20.			
	15a.	Life insura	ince	15	a.	\$	0.00
	15b.	Health ins	urance	15	b.	\$	0.00
	15c.	Vehicle ins	surance	15	C.	\$	80.00
			rance. Specify:		d.	\$	0.00
16.			clude taxes deducted from your pay or include				
	Speci			1	6.	\$	0.00
17.			ease payments:	4-		•	
			ents for Vehicle 1		a. '	· -	305.00
			ents for Vehicle 2		b.		0.00
		Other. Spe	-		C.		0.00
		Other. Spe			d.	\$	0.00
18.			of alimony, maintenance, and support that		8.	\$	0.00
10			your pay on line 5, <i>Schedule I, Your Income</i> s you make to support others who do not liv	(Omolai i omi rooi).	Ο.	<u> </u>	0.00
15.	Speci		s you make to support others who do not hiv	•	9.	Ψ	0.00
20		·	erty expenses not included in lines 4 or 5 of			ur Income	
20.			s on other property		a.		0.00
		Real estat		20			0.00
			homeowner's, or renter's insurance		c.		0.00
			nce, repair, and upkeep expenses	20			0.00
			er's association or condominium dues		e.		0.00
21		r: Specify:				+\$	0.00
	01.10	ii opoony.			٠.	Ι Ψ	0.00
22.		-	monthly expenses				
			through 21.			\$	2,150.00
	22b. (	Copy line 22	2 (monthly expenses for Debtor 2), if any, from	Official Form 106J-2		\$	
	22c. /	Add line 22a	a and 22b. The result is your monthly expense	S.		\$	2,150.00
00	0-1				-		
23.		-	monthly net income.	dula I	_	¢.	2 204 24
			12 (your combined monthly income) from Sche		a.	· —	2,201.34
	230.	Copy your	monthly expenses from line 22c above.	23	D.	-\$	2,150.00
	230	Subtract v	our monthly expenses from your monthly incon	20			
	230.		our monthly expenses from your monthly incon is your monthly net income.	ie. 23	c.	\$	51.34
		THE TESUIT	10 you. Monday Not moonlo.				
24.			an increase or decrease in your expenses w				
	For ex	xample, do yo	ou expect to finish paying for your car loan within the y				ease or decrease because of a
			terms of your mortgage?				
	■ No						
	□Y€	es.	Explain here:				

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Ellis distributore	and an extension				
FIII In this inform	nation to identify your	case:			
Debtor 1	Erica L Labine				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
Official Form	n 106Dec				
		n Individual	Debtor's Sc	hadulas	4045
Declarat	ion About a	iii iiidividaai	Depiol 3 30	iledules	12/15
If two married pe	ople are filing together	, both are equally respo	nsible for supplying corr	ect information.	
•					<u>.</u>
					ment, concealing property, or 0, or imprisonment for up to 20
years, or both. 18	3 U.S.C. §§ 152, 1341, 1	519, and 3571.		•	
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
— Na					
■ No					
☐ Yes. N	lame of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
				Deciaration,	and dignature (Ombiai i offi 119)
	ty of perjury, I declare true and correct.	that I have read the sum	mary and schedules filed	d with this declaration	n and
•			v		
X /s/ Erica	a ∟ ∟abine		X		

Erica L Labine

Signature of Debtor 1

Date September 27, 2016

Signature of Debtor 2

Date

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Fill	in this inform	nation to identify you	r case:			
Deb	tor 1	Erica L Labine				
Dob	tor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Cas	e number					
(if kno						Check if this is an amended filing
						amonada ming
<b>О</b> (1		407				
	ficial For					
Sta	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		ore space is needed, ). Answer every que	•	this form. On the top of any	/ additional pages, write you	ur name and case
		,				
Pari			rital Status and Where You	Lived Before		
1.	What is your	current marital statu	IS?			
	☐ Married					
	■ Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ Na					
	■ No □ Yes List	all of the places you l	ived in the last 3 years. Do no	nt include where you live now	,	
		. ,	·	·		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
_						
					ity property state or territor co, Texas, Washington and V	
	_	•	, ,	,		,
	■ No			W I E		
	☐ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par	Explain	n the Sources of You	r Income			
4.			nployment or from operatin u received from all jobs and a		ear or the two previous cale	ndar years?
			have income that you receive			
	□ No					
	_ '''	in the details.				
	100.1 iii	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
			chock an that apply.	exclusions)	chook an that apply.	and exclusions)
Fro	m January 1	of current year until	■ Wages, commissions,	\$19,537.00	☐ Wages, commissions,	
		d for bankruptcy:	bonuses, tips	¥ : 3,2 3 : 3 • 6	bonuses, tips	
			☐ Operating a business		☐ Operating a business	
					=	

Official Form 107

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Debtor 1 Erica L Labine

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that ap	
	r last calen anuary 1 to		31, 2015 )	■ Wages, commissions, bonuses, tips	\$22,494.00	☐ Wages, common bonuses, tips	nissions,
				☐ Operating a business		☐ Operating a b	usiness
	r the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$16,930.00	☐ Wages, common bonuses, tips	nissions,
				☐ Operating a business		☐ Operating a b	usiness
5.	Include include and other winnings. I	come regard public benef f you are fili	less of wheth it payments; ng a joint cas he gross inco	pensions; rental income; inter e and you have income that y	amples of other income are a	ted from lawsuits; ronly once under Deb	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	Gross income (before deductions and exclusions)
	om January e date you f		nt year until kruptcy:	Retirement Income	\$5,278.00		
	r the calend anuary 1 to			Interest / Dividends	\$716.00		
Pa	rt 3: List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
6.	Are either ☐ No.	Neither De	ebtor 1 nor D	s debts primarily consume ebtor 2 has primarily consu personal, family, or househo	u <mark>mer debts.</mark> Consumer debts	s are defined in 11 l	J.S.C. § 101(8) as "incurred by an
		During the No.	90 days befo		id you pay any creditor a tota	l of \$6,425* or more	9?
		☐ Yes		•	id a total of \$6.425* or more i	n one or more payn	nents and the total amount you
			paid that cre not include	editor. Do not include paymer payments to an attorney for t	nts for domestic support oblig his bankruptcy case.	ations, such as chil	d support and alimony. Also, do
	_	•	•	•	s after that for cases filed on	or after the date of	adjustment.
	■ Yes.			r both have primarily consure you filed for bankruptcy, di	umer debts.  id you pay any creditor a tota	I of \$600 or more?	
		□ No.	Go to line 7				
		■ Yes	include pay	ments for domestic support o	id a total of \$600 or more and bligations, such as child supp		ou paid that creditor. Do not lso, do not include payments to an
			attorney for	this bankruptcy case.			

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Case number (if known) Debtor 1 Erica L Labine

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729	June to Aug 2016	\$915.00	\$18,177.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Re ☐ Suppliers ☐ Other	ard payment
7.	Within 1 year before you filed for bankruptor Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner or more of their voting	erships of which yo g securities; and ar	u are a genera ly managing a	al partner; corporations gent, including one for
	<ul><li>No</li><li>☐ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos  No Yes. List all payments to an insider	igned by an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No ■ Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a □ No □ Yes		erty in the possess			efit of creditors, a

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	0430 10 00322	D00 1	 Page 50 of 67	Descritain
Debtor 1	Erica L Labine		Case number (if known)	

Pa	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contrib	ution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	how the loss occurred Include	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepa	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Cutler & Associates, Ltd. 4131 Main St Skokie, IL 60076 stuartIswanson@gmail.com	Attorney Fees	Aug 2016	\$255.00
	Credit Counseling		Aug 2016	\$335.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li  No Yes. Fill in the details.		or transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Erica L Labine

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your build like both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affa ade as security (such as t	airs? the granting of a			
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and very property transfer		payme	be any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you					
9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.)					of which you are a	
	No Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was
						made
Par	List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and St	orage Units	S	
20.	Within 1 year before you filed for bankruptc	y, were any financial ac	counts or instri	uments he	ld in your name, or for y	our benefit, closed,
	sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc				; shares in banks, credi	t unions, brokerage
	No					
	Yes. Fill in the details.	Loot 4 digito of	Type of sees	int or	Data account was	l aat balanaa
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	r bankruptcy, ar	ny safe dep	osit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	the contents	Do you still have it?
22.	Have you stored property in a storage unit of	or place other than your	home within 1	year befor	e you filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Fise				
			ude any propert	y you borr	owed from, are storing t	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop		Describe t	the property	Value
D-	Alexander Details Alexand Francisco	Code)				
or	the purpose of Part 10, the following definition					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 16-30922 Doc 1 Page 52 of 67
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Debtor 1 Erica L Labine

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occ 24. Has any governmental unit notified you that you may be liable or potentially liable under or No								
_	in violation of an environmental law?							
■ No								
<b>–</b> 140								
☐ Yes. Fill in the details.								
Name of site Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Known ZIP Code)	ronmental law, if you Date of notice vit							
25. Have you notified any governmental unit of any release of hazardous material?								
■ No □ Yes. Fill in the details.								
Name of site Address (Number, Street, City, State and ZIP Code)  Governmental unit Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)	ronmental law, if you Date of notice v it							
26. Have you been a party in any judicial or administrative proceeding under any environmenta	I law? Include settlements and orders.							
■ No □ Yes. Fill in the details.								
Case Title Court or agency Nature of Name Address (Number, Street, City, State and ZIP Code)	of the case Status of the case							
Part 11: Give Details About Your Business or Connections to Any Business								
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the f	ollowing connections to any business?							
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either ful	·							
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
☐ A partner in a partnership	_							
☐ An officer, director, or managing executive of a corporation								
☐ An owner of at least 5% of the voting or equity securities of a corporation								
■ No. None of the above applies. Go to Part 12.								
Yes. Check all that apply above and fill in the details below for each business.								
Business Name Describe the nature of the business Em	ployer Identification number not include Social Security number or ITIN.							
(Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper	es business existed							
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone institutions, creditors, or other parties.	about your business? Include all financial							
■ No								
☐ Yes. Fill in the details below.								
Name Address (Number, Street, City, State and ZIP Code)								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

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Debtor 1 Erica L Labine

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Erica L Labine				
Erica L Labine		Signature of Debtor 2		
Signature of Debtor 1				
Date September 27	', <b>2016</b>	Date		
Did you attach addition	al pages to Your Statemen	nt of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?		
No				
☐ Yes				
Did you pay or agree to	pay someone who is not a	an attorney to help you fill out bankruptcy forms?		
No				
☐ Yes. Name of Person	. Attach the Bankrup	tcv Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		

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Fill in this inform	ation to identify your o	ase:			
Debtor 1	Erica L Labine				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
					g
Official For	m 108				
_		n for Indivi	iduals Filing Unde	r Chapter 7	7 12/15
<u> </u>		ii ioi iiidivi	idadio i illing Orido	· Onaptor	12/13
	ridual filing under chap	, ,	out this form if:		
_	claims secured by you		4 avenina d		
You must file this	er is earlier, unless the	ithin 30 days after y	t expired. ou file your bankruptcy petition of time for cause. You must also ser		
	ople are filing together I date the form.	in a joint case, botl	h are equally responsible for supp	lying correct inform	nation. Both debtors must
	nd accurate as possibl ur name and case num		needed, attach a separate sheet to	o this form. On the t	op of any additional pages,
Part 1: List You	ur Creditors Who Have	Secured Claims			
For any credito information bel	-	rt 1 of Schedule D:	Creditors Who Have Claims Secu	red by Property (Off	icial Form 106D), fill in the
Identify the cree	ditor and the property th	at is collateral	What do you intend to do with th secures a debt?	e property that	Did you claim the property as exempt on Schedule C?
			Journal a dest.		as exempt on concade o.
	fds/wds		☐ Surrender the property.		□No
name:			<ul><li>Retain the property and redeen</li><li>Retain the property and enter in</li></ul>		■ Yes
Description of	2015 Chevy Trax L	S 2WD 27,000	Reaffirmation Agreement.	юа	_ 100
property securing debt:	miles Valued via NADA ti	ade in	☐ Retain the property and [explain	]:	
securing debt.	8/18/16				
Part 2: List Yo	ur Unexpired Personal	Property Leases			
in the information	below. Do not list rea	l estate leases. Une	n Schedule G: Executory Contract expired leases are leases that are some trustee does not assume it. 11 to	still in effect; the lea	
Describe your un	nexpired personal prop	erty leases		Wil	I the lease be assumed?
Lessor's name:					No
Description of leas Property:	sed				Yes
Lessor's name:	and				No
Description of leas Property:	ocu				Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	otor 1	Erica L Labine	Case number (if known)	
	sor's n		□ No	
	scription perty:	n of leased	☐ Yes	
	sor's n		□ No	
	scriptioi perty:	n of leased	☐ Yes	
			□ fes	
	sor's n		□ No	
	scription perty:	n of leased		
1 10	perty.		☐ Yes	
Les	sor's n	ame:	□ No	
		n of leased		
Pro	perty:		☐ Yes	
Les	sor's n	ame:	□ No	
		n of leased		
Pro	perty:		☐ Yes	
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indicated nat is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any persor	nal
piop		•		
X		rica L Labine	X	
		a L Labine	Signature of Debtor 2	
	Signa	ature of Debtor 1		
	Date	September 27, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-30922 Doc 1 Filed 09/28/16 Entered 09/28/16 16:26:15 Desc Main Document Page 60 of 67

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In r	e Erica L Labine		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept			1,505.00
	Prior to the filing of this statement I have received		\$	255.00
	Balance Due		\$	1,250.00
2.	\$_335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name			
6.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspects	s of the bankruptcy c	ase, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of creditor</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to regreaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour</li> </ul>	ement of affairs and plan which rs and confirmation hearing, an educe to market value; exe ns as needed; preparation	may be required; d any adjourned hear emption planning;	rings thereof; preparation and filing of
7.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
	September 27, 2016	/s/ David H. Cutle	r	
_	Date	David H. Cutler		
		Signature of Attorne Cutler & Associat		
		4131 Main St		
		Skokie, IL 60076 847-673-8600 Fa	x: 847-673-8636	
		stuartIswanson@		
		Name of law firm		

## **United States Bankruptcy Court** Northern District of Illinois

In re	Erica L Labine		Case No.	
		Debtor(s)	Chapter 7	
	VERIFICATION OF CREDITOR MATRIX			
		Number of Creditors: 60		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	September 27, 2016	/s/ Erica L Labine Erica L Labine Signature of Debtor		

Affiliated Radiologists SC Dept 4104 Carol Stream, IL 60122-4104

Amita Health Adventist Medical Cntr PO Box 24013 Chattanooga, TN 37422

Assurex Health
Dept CH 19838
Palatine, IL 60055-9838

Avant 222 N. LaSalle St., Suite 1700 Chicago, IL 60601

Avant Inc 640 N Lasalle St Chicago, IL 60654

Barclays Bank Delaware Po Box 8803 Wilmington, DE 19899

Bk Of Amer Po Box 982238 El Paso, TX 79998

Capital One Po Box 30253 Salt Lake City, UT 84130

Capital One Po Box 30253 Salt Lake City, UT 84130

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Chase Bank USA, NA PO Box 4045 Concord, CA 94524-4045 Chase Card Po Box 15298 Wilmington, DE 19850

Chase Card Po Box 15298 Wilmington, DE 19850

Chase Card Po Box 15298 Wilmington, DE 19850

Chevrolet PO Box 100 Williamsville, NY 14231

Citi Pob 6241 Sioux Falls, SD 57117

Comenity Bank C/O Lane Bryant PO Box 182273 Columbus, OH 43218-2273

Comenity Bank/cathrins 4590 E Broad St Columbus, OH 43213

Comenity Bank/Inbryant 4590 E Broad St Columbus, OH 43213

Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218

Computer Credit Center Claim Dept 009500 470 West Hanes Mill Road PO Box 5238 Winston-Salem, NC 27113-5238 Computer Credit Center Claim Dept 009500 470 West Hanes Mill Road PO Box 5238 Winston-Salem, NC 27113-5238

Dept Of Education/neln 121 S 13th St Lincoln, NE 68508

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Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227

GI Associates 10500 S Cicero Oak Lawn, IL 60453-5205

Gm Financial Po Box 1181145 Arlington, TX 76096

Gm Financial Po Box 1181145 Arlington, TX 76096 Green Circle One Wakpamni Lake Housing Batesland, SD 57716

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Loan Depot PO Box 503430 San Diego, CA 92150-3430

Loyola Medicine Two Westbrook Corporate Center, Suite 70 Westchester, IL 60154

Medical Business Bureau, LLC PO Box 326 Grand Haven, MI 49417-0326

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Medical Business Bureau, LLC PO Box 326 Grand Haven, MI 49417-0326

Nationwide Credit & Collection, Inc 815 Commerce Dr, Suite 270 Oak Brook, IL 60523-8852

Nordstrom/td 13531 E Caley Ave Englewood, CO 80111

Palos Community Hospital 12251 S. 80th Ave Palos Heights, IL 60463

Palos Community Hospital 12251 S. 80th Ave Palos Heights, IL 60463 Pleasantview FPD 1970 Plainfield Rd LaGrange Highlands, IL 60525-3709

Progressive Leasing P.O. Box 413110 Salt Lake City, UT 84141

Prosper Funding LLC 221 Main Street, SUite 300 San Francisco, CA 94105

Prosper Marketplace In 101 2nd St Fl 15 San Francisco, CA 94105

Radiology & Nuclear Consultants, SC 44000 Garfield Rd Clinton Twp, MI 48038

Rush Medical Center 1700 W. Van Buren, Suite 161 Chicago, IL 60612

Seas & Associates, LLC PO Box 15174 Little Rock, AR 72231

Secretary of State, License Renewal 3701 Winchester Rd Springfield, IL 62707-9700

Silver Cross Hospital Mail Processing Center PO Box 739 Moline, IL 61266-0739

Syncb/amazon Po Box 965015 Orlando, FL 32896

Syncb/amer Eagle Dc Po Box 965005 Orlando, FL 32896 Syncb/pep Boys C/o Po Box 965036 Orlando, FL 32896

Synchrony Bank C/O Pep Boys PO Box 960061 Orlando, FL 32896-0061

University Anesthesiologists SC PO Box 128 Glenview, IL 60025-0128

University Pain Physicians LLC PO Box 1151 Glenview, IL 60025-8103

University Pathologists, P.C 5700 Southwyck Blvd Toledo, OH 43614-1509

Wfds/wds Po Box 1697 Winterville, NC 28590